

Work Order ID 91517

October-10-12 4:08:04 PM

91517

Page 1

Item ID: D4545-047

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Retainer. Inner, LH (Top)

Start Date: 10/10/2012 Start Qty: 15.00

15

Cust Item ID:

Required Date: 11/02/2013 Req'd Qty: 15.00

15

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12-10-11

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4545

C

100

Pick Kit

0.00

100

Packaging

Memo

Packaging

0.00

SCRAP

15x

13/01/24

110

110

Small Fab

Small Fab

Memo

0.00

1- ASSEMBLE AND BEND TABS AS PER DWG

2- DISASSEMBLE AND DEBURR

3- DIMPLE HOLES AS PER DWG

15x

13/01/24
SB 13/07/31

Pto →

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other - <input checked="" type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>	13/04/23	# 100	x15	Parts ARE SCRAP Due to Design Change. Per ECN 13-554	DAS 16 9-89 13/04/23	SCRAP + Destroy	13.04.23	13/04/24	DAS 16 9-89 13/04/23		
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		
Per ECN 13-554											

Work Order ID 91517

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Page 2

Item ID: D4545-047

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Retainer, Inner, LH (Top)

Start Date: 10/10/2012 Start Qty: 15.00

15

Cust Item ID:

Required Date: 11/02/2013 Req'd Qty: 15.00

15

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00		(DAS) 15 B-231		IS			
130 *130* HandFinish Hand Finishing	Chemical Conversion Coat per QSI005 4.1 Memo	0.00 0.00							
140 *140* QC Quality Control	QC7-Inspect Chemical Conversion Coat Memo	0.00 0.00							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
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Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

91517

Page 3

Accept

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Start Date: 10/10/2012 **Start Qty:** 15.00

15

Customer:

Required Date: 11/02/2013 **Req'd Qty:** 15.00

15

Reference:

Run Start *NR1*

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Stop *NR2*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 91517

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91517

Page 4

Item ID: D4545-047

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Retainer, Inner, LH (Top)

Start Date: 10/10/2012 Start Qty: 15.00

15

Cust Item ID:

Required Date: 11/02/2013 Req'd Qty: 15.00

15

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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200

QC21- Final Inspection - Work Order Release

0.00

200

QC

Memo

0.00

Quality Control

2013-04-24

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

October-10-12 4:08:07 PM

Page 1

Work Order ID: 91517

91517

Parent Item: D4545-047

D4545-047

Parent Item Name: Retainer, Inner, LH (Top)

Start Date: 10/10/2012

Required Date: 11/02/2013

Start Qty: 15.00

Required Qty: 15.00

Comments: IPP REV:A 12.01.13 new issue DD verf:JLM IPP REV:B
12.02.27 AS PER DWG REV.B DD VERF:EC IPP REV:C 12.05.08
as per dwg revC DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D4541-7		Manufactured	No			100	Each	16.0000	1	15			
D4541-7													
Bracket													

Location	Loc Qty	Loc Code
FG	-3	
78768	3	
GA	19	
87973	1	
90446	12	

D4542-7		Manufactured	No			100	Each	50.0000	1	15			
D4542-7													
Retainer, Inner													

Location	Loc Qty	Loc Code
GA	45	
91186	45	
ST112	5	
90342	5	

Handwritten notes:
 13/01/24
 891435
 15x
 13/01/24
 891465
 15x

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data	<input type="checkbox"/>											
Equip/Tooling	<input type="checkbox"/>											
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Other	<input type="checkbox"/>											
Process	<input type="checkbox"/>											
Supplier	<input type="checkbox"/>											
Training	<input type="checkbox"/>											
Unapproved	<input type="checkbox"/>											
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 2

Work Order ID: 91517

91517

Parent Item: D4545-047

D4545-047

Parent Item Name: Retainer, Inner, LH (Top)

Start Date: 10/10/2012

Required Date: 11/02/2013

Start Qty: 15.00

Required Qty: 15.00

MS20426AD3-4

Purchased

No

145

Each

12,752.00

16

240

MS20426AD3-4

RIVET

Location

Loc Qty

Loc Code

333

1641

122452

1641

ST316

135

104374

135

ST334

10976

123021

2976

123164

8000

MS21059L3K

Purchased

No

145

Each

1,821.000

8

120

MS21059L3K

Nutplate

Location

Loc Qty

Loc Code

316

30

122452

30

ST316

1791

122814

32

123021

1

123100

758

123265

1000

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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FAULT CATEGORY												
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ITEM	QTY -041	QTY -042	QTY -043	QTY -044	QTY -045	QTY -046	QTY -047	QTY -048	PART NUMBER	DESCRIPTION
	X								D4545-041	RETAINER, LH INNER (LOWER)
		X							D4545-042	RETAINER, RH INNER (LOWER)
			X						D4545-043	RETAINER, LH INNER (SIDE)
				X					D4545-044	RETAINER, RH INNER (SIDE)
					X				D4545-045	RETAINER, LH INNER (TOP CORNER)
						X			D4545-046	RETAINER, RH INNER (TOP CORNER)
							X		D4545-047	RETAINER, LH INNER (TOP)
								X	D4545-048	RETAINER, RH INNER (TOP)
1	1								D4541-1	BRACKET
2		1							D4541-2	BRACKET
3			1	1					D4541-3	BRACKET
4					1	1			D4541-5F	BRACKET
5							1	1	D4541-7	BRACKET
6	1								D4542-1	RETAINER
7		1							D4542-2	RETAINER
8			1	1					D4542-3	RETAINER
9					1	1			D4542-5	RETAINER
10							1	1	D4542-7	RETAINER
11	40	38	28	28	12	12	16	16	MS20426AD3-4	RIVET
12	19	18	14	14	6	6	8	8	MS21059L3K	NUTPLATE
13	1	1							MS21061L3K	NUTPLATE

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 91517 MJS
12-10-11

RELEASED
2012-05-07
MJS

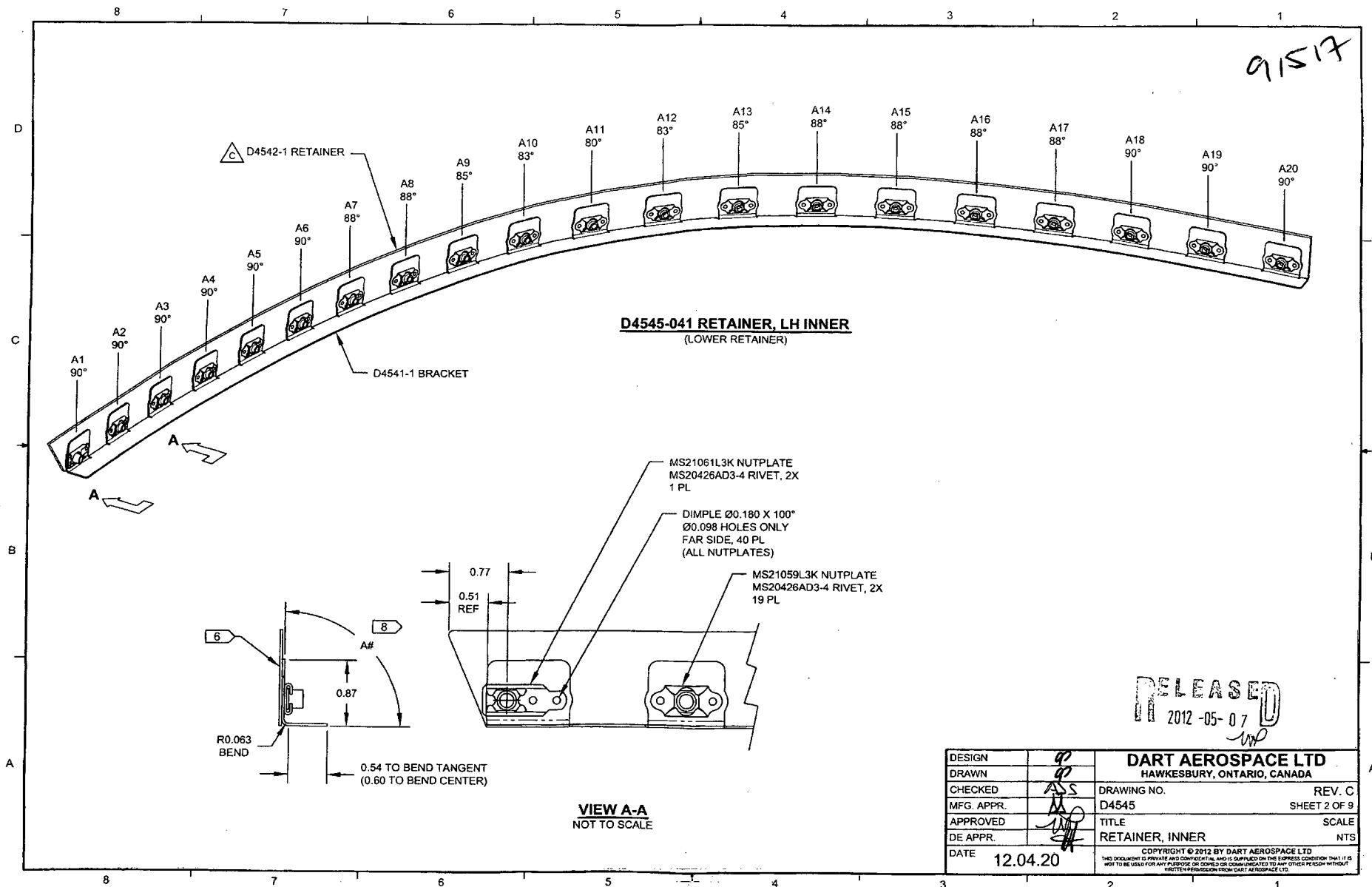
NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: AFTER FORMING AND PRIOR TO ASSEMBLY, CHEMICAL CONVERSION COAT D4541-X & D4542-X PER DART QSI 005 4.1
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N & B/N PER DART QSI 044 6.1
- 7) WEIGHT: -041/-042 = 0.38 lbs, -043/-044 = 0.27 lbs,
-045/-046 = 0.11 lbs, -047/-048 = 0.15 lbs
- 8) BEND INDIVIDUAL TABS ON D4541-X BRACKETS TO CORRESPONDING "A#" (A1, A2, ETC..) VALUE

C	CHG FINISH (ZN A8-1); D4541-5F WAS -5 (C4-1) REMOVE TRANSFER DRILL NOTES	CP	12.04.20
B	ADD FINISH (ZN A8-1)	CP	12.02.01
A	NEW ISSUE	CP	12.01.09
REV.	DESCRIPTION	BY	DATE
DESIGN	qp		
DRAWN	qp		
CHECKED	ASS		
MFG. APPR.			
DE APPR.			
DATE	12.04.20		

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D4545	REV. C SHEET 1 OF 9
TITLE RETAINER, INNER	SCALE NTS
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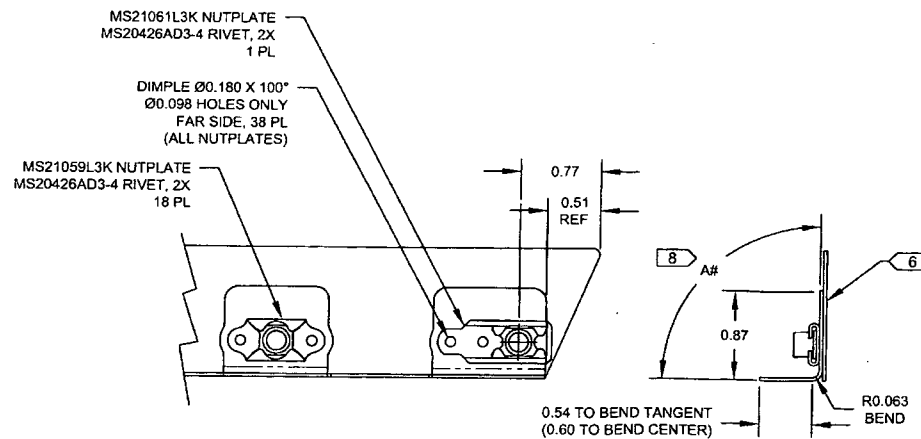
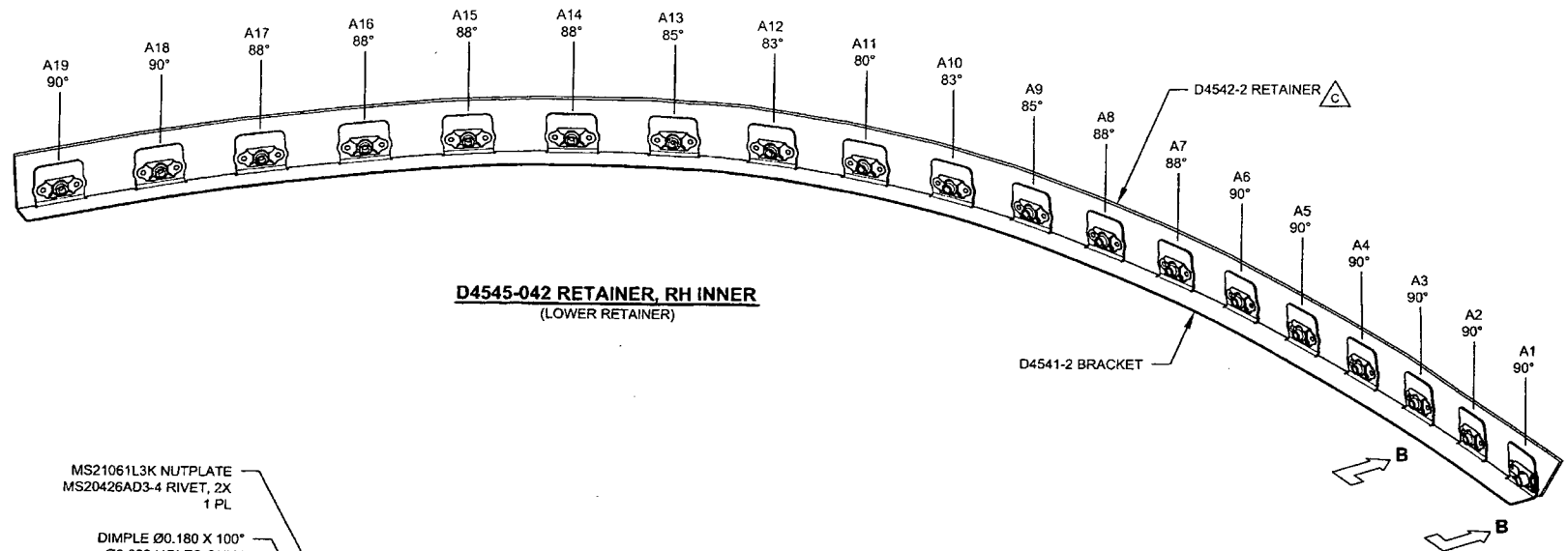
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2012-05-07

DESIGN	92	DART AEROSPACE LTD	
DRAWN	92	HAWKESBURY, ONTARIO, CANADA	
CHECKED	ASS	DRAWING NO.	REV. C
MFG APPR.	DA	D4545	SHEET 2 OF 9
APPROVED	DA	TITLE	SCALE
DE APPR.	DA	RETAINER, INNER	NTS
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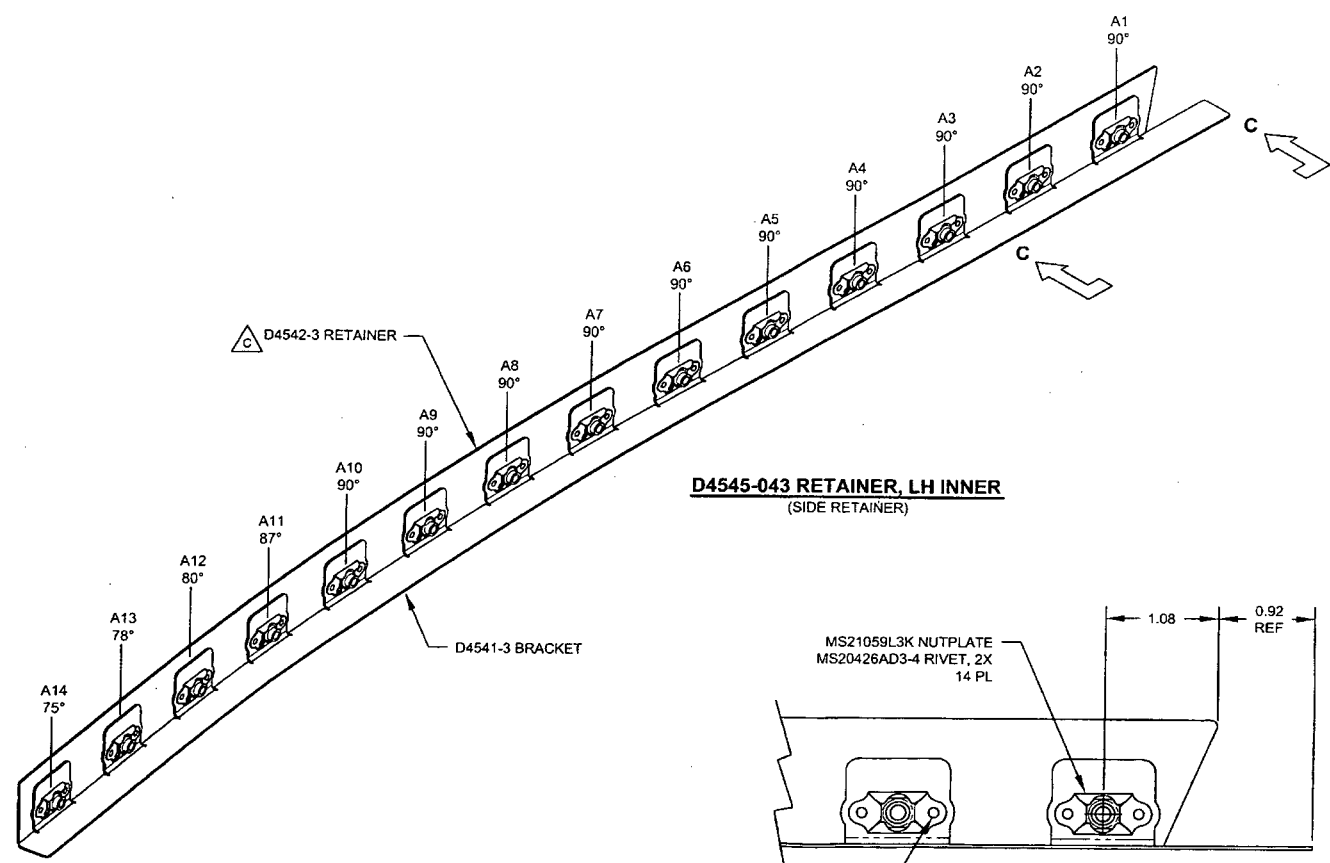


VIEW B-B
NOT TO SCALE

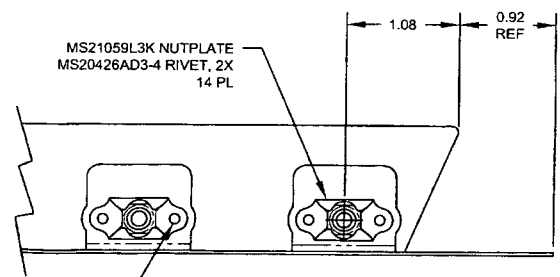
2012-05-07

DESIGN	90	DART AEROSPACE LTD	
DRAWN	90	HAWKESBURY, ONTARIO, CANADA	
CHECKED	AS	DRAWING NO.	REV. C
MFG APPR.	AD	D4545	SHEET 3 OF 9
APPROVED	AD	TITLE	SCALE
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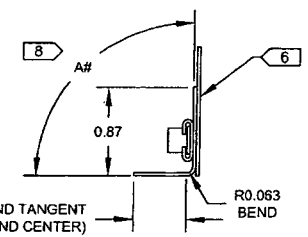
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D4545-043 RETAINER, LH INNER
(SIDE RETAINER)

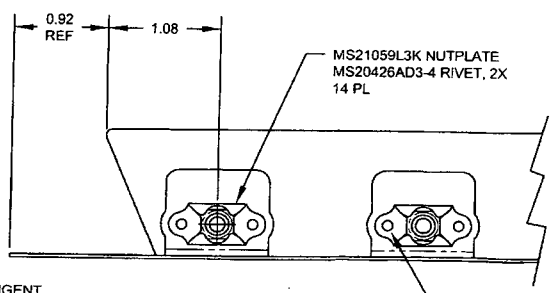
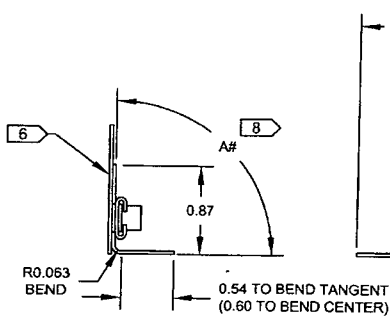
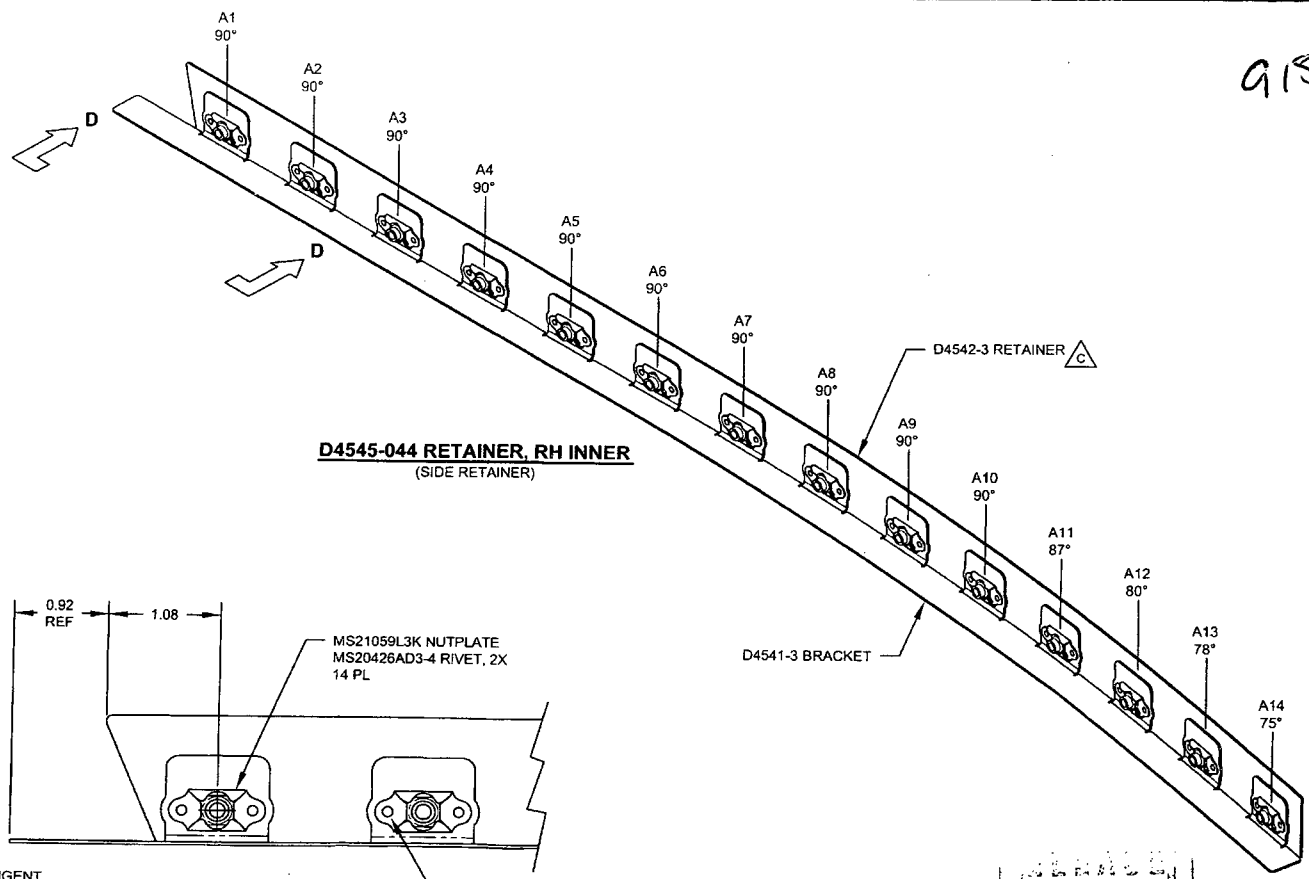


DIMPLE Ø0.180 X 100°
Ø0.098 HOLES ONLY
FAR SIDE, 28 PL



DESIGN	92	DART AEROSPACE LTD	
DRAWN	92	HAWKESBURY, ONTARIO, CANADA	
CHECKED	AS	DRAWING NO.	REV. C
MFG. APPR.		D4545	SHEET 4 OF 9
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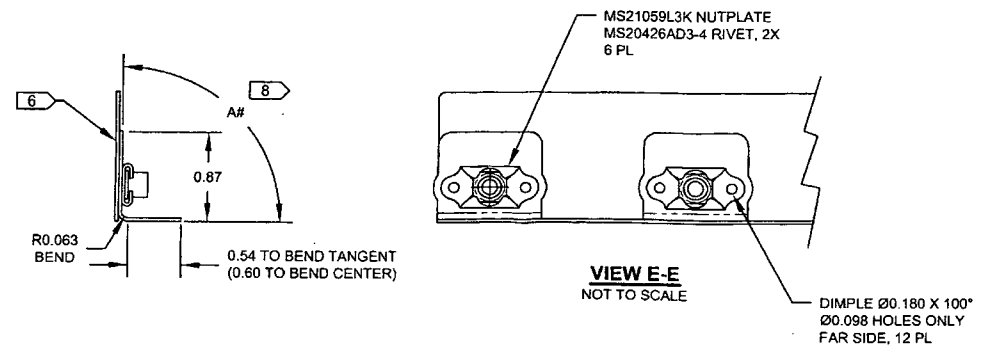
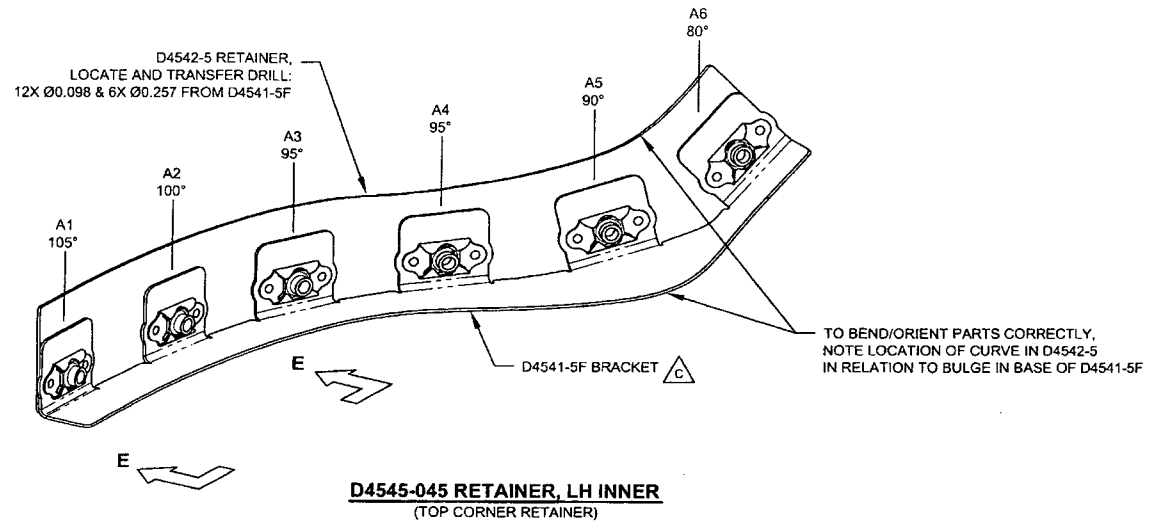
DIMPLE Ø0.180 X 100°
Ø0.098 HOLES ONLY
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2012-05-03
MP

DESIGN	90	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	90		
CHECKED	ASS	DRAWING NO. D4545	REV. C
MFG. APPR.	MP	SHEET 5 OF 9	
APPROVED	MP	SCALE	
DE APPR.	MP	TITLE	
DATE	12.04.20	RETAINER, INNER	
		NTS	

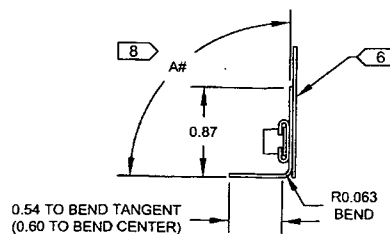
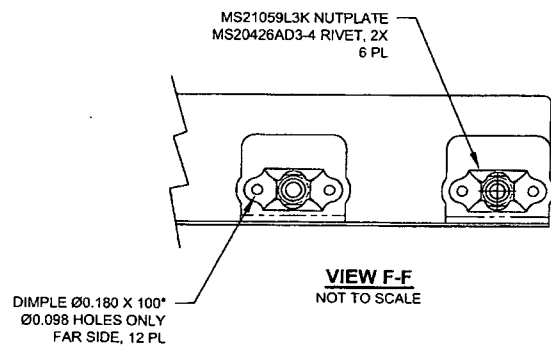
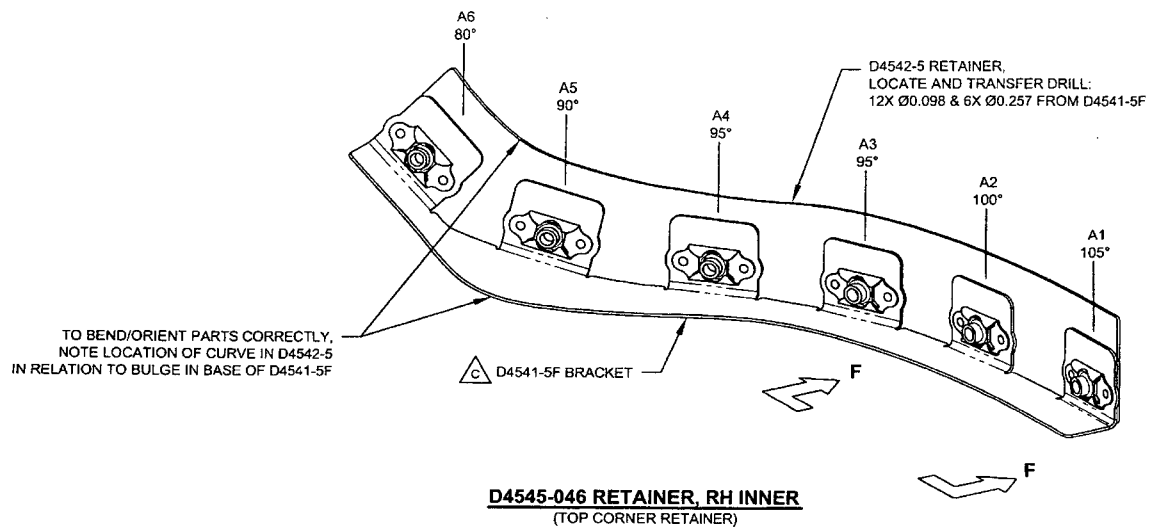
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MFG. APPR.	AS	D4545	SHEET 6 OF 9
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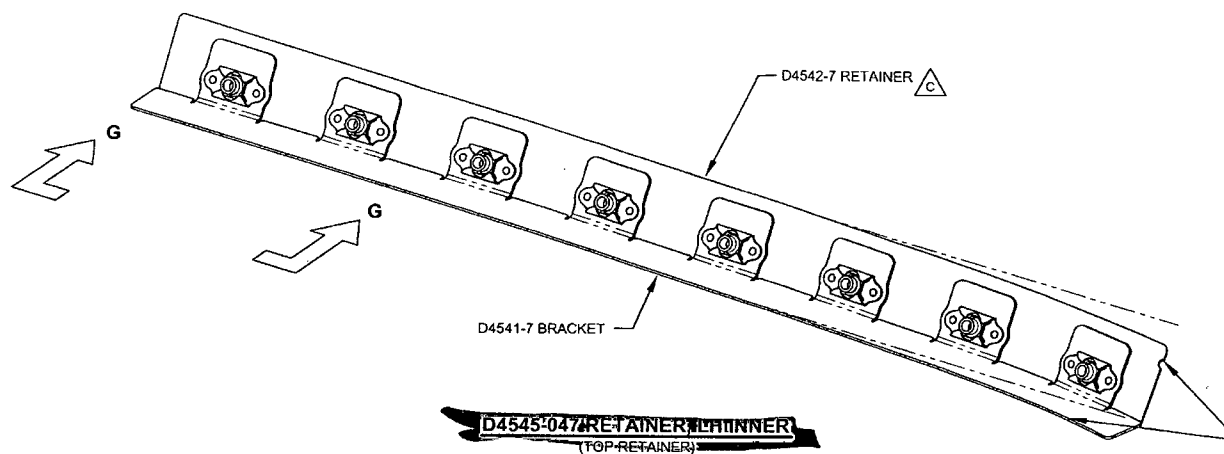
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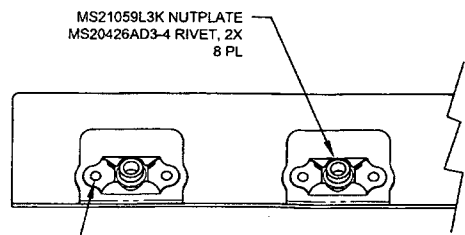
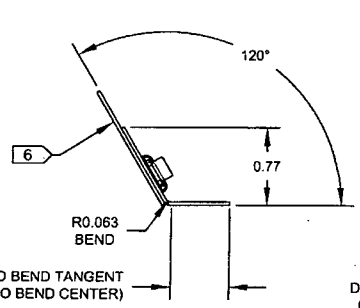
DESIGN	92	DART AEROSPACE LTD	
DRAWN	92	HAWKESBURY, ONTARIO, CANADA	
CHECKED	ASS	DRAWING NO.	REV. C
MFG. APPR.	MP	D4545	SHEET 7 OF 9
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D4545-047 RETAINER, INNER
(TOP-RETAINER)

TO BEND/ORIENT PARTS CORRECTLY,
NOTE LOCATION OF TOOLING MARK IN D4542-7
IN RELATION TO CURVE IN BASE OF D4541-7



DIMPLE Ø0.180 X 100°
Ø0.095 HOLES ONLY
FAR SIDE, 16 PL

VIEW G-G
NOT TO SCALE

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DRAWN	92		
CHECKED	ASS	DRAWING NO. D4545	REV. C
MFG. APPR.	MA		SHEET 8 OF 9
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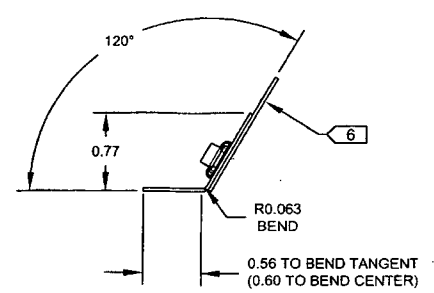
TO BEND/ORIENT PARTS CORRECTLY,
NOTE LOCATION OF TOOLING MARK IN D4542-7
IN RELATION TO CURVE IN BASE OF D4541-7

△ D4542-7 RETAINER

D4541-7 BRACKET

D4545-048 RETAINER, RH INNER
(TOP RETAINER)

MS21059L3K NUTPLATE
MS20426AD3-4 RIVET, 2X
8 PL



2012-05-03

DIMPLE Ø0.180 X 100°
Ø0.098 HOLES ONLY
FAR SIDE, 16 PL

VIEW H-H
NOT TO SCALE

DESIGN		DART AEROSPACE LTD	
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CHECKED	ASS	DRAWING NO. D4545	REV. C
MFG. APPR.	MD		SHEET 9 OF 9
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